



BONE OSSIFICATION SUPPRESSION AGENTS PA SUMMARY

PREFERRED	Alendronate tablets, Etidronate disodium, Miacalcin nasal spray
NON-PREFERRED	Actonel, Actonel with Calcium, Alendronate Solution, Atelvia, Binosto, Boniva (brand), Calcitonin-salmon nasal spray, Didronel, Fosamax Plus D, Ibandronate (generic), Miacalcin injectable

LENGTH OF AUTHORIZATION: 1 Year

NOTE: If Boniva is approved, the PA will be issued for generic ibandronate.

PA CRITERIA:

For Actonel, Actonel with Calcium, Atelvia, and Boniva (brand and generic ibandronate)

- ❖ Member must have experienced contraindications, drug-drug interactions, or history of intolerable side effects to generic alendronate.

For Didronel

- ❖ Submit a written letter of medical necessity stating the reason(s) that generic etidronate is not appropriate for the member.

For Fosamax Plus D

- ❖ Submit a written letter of medical necessity stating the reason(s) that generic alendronate is not appropriate for the member.

For Binosto or Alendronate Solution

- ❖ Member must have dysphagia, an esophageal disorder, or other circumstance that prevents the use of generic alendronate tablets.

For Miacalcin Injection

- ❖ Approvable for members who require or rapid decrease in calcium or explain why brand-name Miacalcin nasal spray cannot be used.

For Generic Calcitonin-Salmon Nasal Spray

- ❖ Submit a written letter of medical necessity stating the reason(s) that brand-name Miacalcin nasal spray is not appropriate for the member.

EXCEPTIONS:

- ❖ Exceptions to these conditions of coverage are considered through the prior authorization process.
- ❖ The Prior Authorization process may be initiated by calling **Catamaran at 1-866-525-5827**.

PA and APPEAL PROCESS:

- ❖ For online access to the PA process please go to www.mmis.georgia.gov/portal, highlight the pharmacy link on the top right side of the page, and click on “prior approval process”.



QUANTITY LEVEL LIMITATIONS:

- ❖ For online access to the current Quantity Level Limit please go to www.mmis.georgia.gov/portal, highlight Provider Information and click on Provider Manuals. Scroll to the page with Pharmacy Services Part II and select that manual.